	ive January 1, 20	03	RECORD	2	091 091	· 2、 子	<u>US</u>	<u></u>
CLAIMS A	(Column 1)	(Column 2		MALL EX	mry EE	OR-	OTHER SMALL	
TOTAL CLAIMS	67			RATE	FEE		RATE	FEE
FOR	NUMBER FILED	NUMBER E	KTRA .	BASICFEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS	6.7 minus 20=	.47		X\$ 9⇒	• • • •	OR	X\$18=	846
INDEPENDENT CLAIMS	g minus 3 =	•		X42=	• • •	OR	X84=	420
MULTIPLE DEPENDENT CLAIM P	RESENT			+140=		OR	+280=	100
If the difference in column 1 is	less than zero, enter	"O" in colum	m 2	TOTAL		OR	TOTAL	2014
CLAIMS AS A	MENDED - PAR (Colu	•_	tumn 3)	SMALL	ENTITY	OR	OTHER SMALL	THAN
CLAIMS .	HIGH HIGH PREVI PAID	EST BER PR DUSLY E	ESENT XTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AFTER AMERIOMENT Total • / / Independent • //	Minus •• (,7.	ZI [X\$ 8=		ØR	X\$18=	1
Independent • Side Teleproperation of M	Minus	8 -/		X42=	./	OR	X84=	
FIRST PRESENTATION OF M	·	· ·		+140 -	/:	OR	+280=	
dulos de		• •		TOTAL DOIT, FEE	/ 	OR	ADDIT FEE	
Mile N (Column 1)	Colu		fumn 3)				· .	
CLAIMS REMARKING AFTER AMENDMENT	HKGI NUM PREVI PAID	BER 'PR	ESENT XTRA	RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONA FBE
G Total	Minus •• (,7 -	Ø	X\$ 9=		ÓR	X\$18=	
Independent • V	Minus . eee	8 -	O	X42-	÷	OR	. X84= .	
FIRST PRESENTATION OF M	ULTIPLE DEPENDENT	CLAIM	انك	+140=	· · ·	OR	+280=	一十
	•	• •	L	TOTAL		OR	TOTAL	
V) 14/18 (Column 1)	(Cohe	mri 2) (Co	. A Kumn 3) · ·	ldoit. Fee i			ADDIT FEE	
CLAIMS · REMAINING	. High NUM PREVI	EST BER PE	ESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONA
AFTER AMENDMENT Total Independent	Minus PAID	FOR	_	X\$ 9-	FEE .		X\$18÷	FÉE
Independent •	Mission of the Control of the Contro	V		X42=		OR	X84-	
FIRST PRESENTATION OF M	ULTIPLE DÉPENDEN	CLAIM			-/	OR		
" If the entry in column 1 is less than 1	the entry in column 2. with	 9 °O" in column	. L	+140=		OR	+280=	. /-
" If the "Highest Number Previously, F	ald For IN THIS SPACE	is less than 20, is less than 3,		DOIT FEE		OR	ADDIT: FEE	<i>V</i>